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Substitute for form 1449A/PTO		<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		Application Number	10/540,890
(use as many sheets as necessary)		Filing Date	February 23, 2006
		First Named Inventor	GILAD, Zvika
		Art Unit	3739
		Examiner Name	Candler, Samuel M.
Sheet	1	of	2
		Attorney Docket Number	P-5609-US

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. **Applicant's unique citation designation number (optional):** See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3).¹ For Japanese patent documents, indicate the year of the reign of the Emperor must precede the serial number of the patent document.² Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible.³ Applicant is to place a check mark here if English language Translation is attached.

The collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (or by the USPTO to process) an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and maintaining the completed information from the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form under suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

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Substitute for form 1449B/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		Application Number	10/540,890
		Filing Date	February 23, 2006
		First Named Inventor	GILAD, Zvika
		Art Unit	3739
<i>(use as many sheets as necessary)</i>		Examiner Name	Candler, Samuel M.
Sheet	2	of	2
		Attorney Docket Number	

NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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